



Medicaid Provider Billing Changes for Dates of Service beginning February 1, 2012

Starting February 1, 2012 DHH will begin transitioning approximately 900,000 Medicaid and LaCHIP enrollees to *BAYOU HEALTH* Plans. When a recipient is enrolled in a *BAYOU HEALTH* Plan, prior authorization requests, as well as claims for all Medicaid services except those indicated below must be submitted to the member's *BAYOU HEALTH* Plan instead of Molina. Each *BAYOU HEALTH* Plan has established its own submitter network requirements. For more information on *BAYOU HEALTH* see: <http://new.dhh.louisiana.gov/index.cfm/page/36/n/77>

Claims for Medicaid and LaCHIP recipients who are **not enrolled** with a *BAYOU HEALTH* Plan shall continue to be submitted to Molina as usual.

It is the responsibility of each provider to confirm a Medicaid recipient's eligibility status **and** *BAYOU HEALTH* Plan enrollment status **prior to rendering services**. Eligibility and enrollment status can be verified through our MEVS/REVS systems which are being revised to include the name of the *BAYOU HEALTH* Plan the recipient is linked to, if applicable. Recipients have the option to change Plans, so eligibility **should be verified each time services are provided** to prevent unnecessary claim denials.

Health Plans can be contacted using the telephone numbers listed below for inquiries related to recipients enrolled in their Plan:

BAYOU HEALTH - Prepaid Plans

Amerigroup (1-504-834-1271)

LaCare (1-888-922-0007)

Louisiana Healthcare Connections (1-866-595-8133)

BAYOU HEALTH - Shared Plans

Community Health Solutions (1-855-247-5248)

United Healthcare Community Plan (1-866-675-1607)

The following are services **not** provided by the Prepaid Plans, and will continue to be prior authorized and/or paid through Molina:

- Dental Services;
- Early Step Services (IDEA Part C Program Services) provided through DHH;
- Personal Care Services (EPSDT and LT-PCS);
- Intermediate Care Facilities for the Developmentally Disabled (ICF/DD) Services;
- Home & Community-Based Waiver Services;
- Hospice Services;
- School-based Individualized Education Plan (IEP) Services provided by a school district and billed through the intermediate school district;
- Nursing Facility Services;
- Pharmacy (Prescription Drugs);
- Specialized Behavioral Health Services (except FQHCs and RHCs); and
- Targeted Case Management.

The following are services not preprocessed or prior authorized by the Shared Plans, and will continue to be prior authorized and/or paid through Molina :

- Dental Services;
- Durable Medical Equipment and certain supplies;
- Early Step Services (IDEA Part C Program Services) provided through DHH
- Personal Care Services (EPSDT and LT-PCS);
- Intermediate Care Facilities for the Developmentally Disabled (ICF/DD) Services;
- Home & Community-Based Waiver Services;
- Hospice Services;
- Non-Emergency Transportation;
- Nursing Facility Services;
- Pharmacy (Prescription Drugs);
- Prosthetics and Orthotics;
- School-based Individualized Education Plan (IEP) Services provided by a school district and billed through the intermediate school district;
- Specialized Behavioral Health Services (except FQHCs and RHCs); and
- Targeted Case Management.

Providers should contact Molina Provider Relations (FI) at (800) 473-2783 or (225) 924-5040 with billing or policy questions related to the above or recipients not enrolled in a *BAYOU HEALTH* Plan.